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met Allowance SWEDEN Verified and Acknowledged Examiner's Signature Initials ADDRESS					DRA	SHEETS TOTA DRAWING CLAI 6 16		MS	INDEPENDENT CLAIMS 2
00466 TITLE Device for retrievir	ng a go	if ball							
FILING FEE F RECEIVED N 450	FEES: Authority has been given in Paper No to charge/credit DEPOSIT ACCOUNT No for following:				All Fees 1.16 Fees (Filing) 1.17 Fees (Processing Ext. of time) 1.18 Fees (Issue) Other Credit				